



PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09770383

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			21		Company of the compan		ſ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			∂/ minus 20=		* /			X\$ 9=		OR	X\$18=	18
INDEPENDENT CLAIMS			minus 3 =		* #		ľ	X40=		OR	X80=	80
ΜU	JLTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL.	808	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 2)	Minus	** 2		=		X\$ 9=		OR	X\$18=	·
	Independent	NTATION OF MU	Minus	***	T CL AINA	=		X40=		OR	X80=	
L	FINOTPHESE	INTATION OF MIC	JUITLE DEF	CINDEN	CLAIIVI			+135=		OR	+270=	
	e de la companya de l			•				TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)										ADDIT: 1 EE	·
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 18	Minus	** 0	<u>2 /</u>	=		X\$ 9=	A STATE OF THE PARTY OF THE PAR	OR	X\$18=	
	Independent	NTATION OF MU	Minus	***	CLAIM			X40=		OR-	X80=	
	I INST PALSE	NTATION OF MC	DETIFIED DEF	LNDEN	CLAIM			+135=		OR	+270=	Control of the Contro
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur	nn 2)	(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F OL ALBA			X40=		OR	X80=	
	FIRST PRESE	NTATION OF MU	JLIIPLE DEF	'ENDEN'	CLAIM		-	+135≈		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE TOTAL ADDIT. FEE ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												